



**REGULATORY/ MEDICAL HEALTH SERVICES  
EMERGENCY MEDICAL SERVICES**

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January 3, 2019

To: Emergency Medical Services Distribution

From: Michael De Laby, MSN, RN, Paramedic  
Assistant EMS Administrator 

**SUBJECT: REVISION TO EMS FEES EFFECTIVE JANUARY 1, 2019**

This is to inform you that the Orange County Board of Supervisors approved the following revised emergency medical services provider fees at its February 14, 2017 meeting:

Fee Description	Fee Effective January 1, 2019
Ambulance Company License	\$ 2,234 per year
Ambulance Company Unit Inspection per Vehicle	\$ 160 per year
Ambulance Company Unit Re-Inspection/ Vehicle	\$ 109 per hour
Ambulance Driver/Attendant License <sup>(1)(4)</sup>	\$ 85 every two years
EMT OC Certification <sup>(2)</sup>	\$ 125 every two years
Card Replacement	\$ 25
Paramedic Accreditation	\$ 73
Mobile Intensive Care Nurse Application	\$ 108 every two years
Trauma Receiving Center <sup>(3)</sup>	\$ 9,185 every three years
Continuing Education Provider Application	\$ 325 every four years
EMT Training Program Application	\$ 923 every four years
Paramedic Training Program Application	\$ 932 every four years
Inter-facility Transport Service Provider Application	\$ 1,525 per year
Customized Data Reports	\$ 109 per hour

- <sup>1</sup> License expiration shall not exceed the individual's EMT certification date
- <sup>2</sup> Does not include the State pass-through fee(s) (\$75 initial; \$37 recertification)
- <sup>3</sup> Does not include American College of Surgeons and accommodation costs
- <sup>4</sup> Ambulance Driver/Attendant License fee will be waived if applicant obtains their EMT OC Certification through Orange County EMS

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Attachment: Board Resolution No. 17-025

**RESOLUTION OF THE BOARD OF SUPERVISORS OF  
ORANGE COUNTY, CALIFORNIA**

February 14, 2017

WHEREAS, the Health Care Agency is proposing to update its Emergency Medical Services Provider fee schedule; and,

WHEREAS, Orange County Emergency Medical Services Division within the Health Care Agency is the Local Emergency Medical Services Agency and, accordingly, is responsible for Emergency Medical System management including direction, coordination, and evaluation of emergency medical services for the County of Orange; and,

WHEREAS, Orange County Emergency Medical Services Division within the Health Care Agency provides oversight to all providers of emergency medical services; and,

WHEREAS, the fees listed herein are authorized by law, including Division 2.5 of the Health and Safety Code and Division 9 of Title 22 of the California Code of Regulations; and,

WHEREAS, this Board has conducted a Public Hearing.

NOW, THEREFORE, BE IT RESOLVED that this Board finds that the fees listed herein are for the purposes of meeting operating expenses and are, therefore, statutorily exempt from California Environmental Quality Act (CEQA) per Section 15273 of the CEQA Guidelines.

IT IS FURTHER RESOLVED THAT this Board finds that these fees meet the requirements set forth in subdivision (e)(1), (e)(2), or (e)(3), as applicable, of Section 1 of Article XIII C of the California Constitution, and are therefore exempt from the definition of a tax as used therein.

BE IT FURTHER RESOLVED that effective January 1, 2017, this Board hereby establishes Emergency Medical Services Provider fees, and hereby rescinds Resolution No. 05-096 dated April 12, 2005, and the following Orange County Emergency Medical Services Division fees are established for CY 2017 (effective January 1, 2017 – December 31, 2017), CY

2018 (effective January 1, 2018 = December 31, 2018), and CY 2019 (effective January 1, 2019

- December 31, 2019) as follows:

**Emergency Medical Services Provider Fee Schedule**

EMS Provider Fee Title	Frequency	CY 2017	CY 2018	CY 2019
Ambulance Company License	Annual	\$2,140	\$2,207	\$2,234
Ambulance Company Unit Inspection/per vehicle		\$153	\$158	\$160
Ambulance Company Unit Re-Inspection/vehicle	Hourly	\$104	\$107	\$109
Ambulance Driver/Attendant License	Biennial	\$82	\$84	\$85
EMT OC Certification		\$120 <sup>2</sup>	\$124 <sup>2</sup>	\$125 <sup>2</sup>
Card Replacement	Variable	\$25	\$25	\$25
Paramedic Accreditation		\$69	\$72	\$73
Mobile Intensive Care Nurse Application	Biennial	\$103	\$107	\$108
Trauma Receiving Center	Triennial	\$8,818 <sup>3</sup>	\$9,079 <sup>3</sup>	\$9,185 <sup>3</sup>
Continuing Education Provider Application	4 years	\$311	\$321	\$325
EMT Training Program Application		\$884	\$912	\$923
Paramedic Training Program Application		\$893	\$921	\$932
Interfacility Transport Service Provider Application	Annual	\$1,461	\$1,506	\$1,525
Customized Data Report	Hourly	\$104	\$107	\$109

<sup>1</sup> License expiration shall not exceed the individual's EMT certification expiration date

<sup>2</sup> Does not include State pass-through fee(s) (\$75 initial; \$37 recertification)

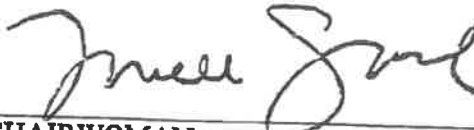
<sup>3</sup> Does not include American College of Surgeons & accommodation costs

BE IT FURTHER RESOLVED that the \$82 fee in CY 2017, the \$84 fee in CY 2018, and the \$85 fee in CY 2019 for the Ambulance Driver/Attendant License will be waived if the licensee obtains their EMT OC Certification through Orange County EMS.

BE IT FURTHER RESOLVED that on or about January 1, 2020, and each three years thereafter, the Auditor–Controller shall perform a cost recovery analysis for the program. The Health Care Agency shall adjust the recommended fee schedule based upon the Auditor–Controller's determination of actual costs and return to this Board for consideration of the recommended fee schedule.

The foregoing was passed and adopted by the following vote of the Orange County Board of Supervisors, on February 14, 2017, to wit:

AYES: Supervisors: TODD SPITZER, LISA A. BARTLETT, ANDREW DO  
MICHELLE STEEL  
NOES: Supervisor(s):  
EXCUSED: Supervisor(s): SHAWN NELSON  
ABSTAINED: Supervisor(s):


  
\_\_\_\_\_  
CHAIRWOMAN

STATE OF CALIFORNIA )  
                                  )  
COUNTY OF ORANGE )

I, ROBIN STIELER, Clerk of the Board of Orange County, California, hereby certify that a copy of this document has been delivered to the Chairman of the Board and that the above and foregoing Resolution was duly and regularly adopted by the Orange County Board of Supervisors

IN WITNESS WHEREOF, I have hereto set my hand and seal.



  
\_\_\_\_\_  
ROBIN STIELER  
Clerk of the Board  
County of Orange, State of California

Resolution No: 17-025  
Agenda Date: 02/14/2017  
Item No: 45



I certify that the foregoing is a true and correct copy of the Resolution adopted by the Board of Supervisors, Orange County, State of California

Robin Stieler, Clerk of the Board of Supervisors

By: \_\_\_\_\_  
Deputy